

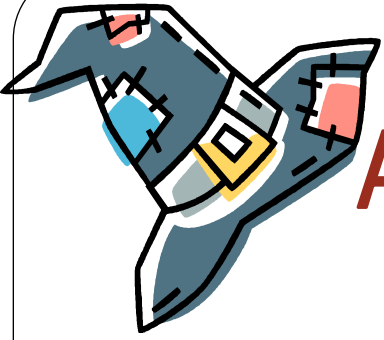


Preparing for Accreditation

“Do not go where the path may lead. Go instead where there is no path and leave a trail.” - Emerson

Leading the Way

- Build the foundation = 3 Functions & 10 Essential Services
- May need to avoid the “A” word
- Focus on the mission to be about improving public health
- Learn from those further down the trail
- Strength in unity (local to local and local to state)



Accreditation Coordinator (AC)

- Essential to designate a person(s) to oversee the overall process so choose wisely!!
- Best person to select may be the administrator or it may not
- AC needs to have the “big picture” understanding of accreditation
- AC needs to truly believe in the benefits of the process

Tasks of Accreditation Coordinator

- Ring leader
- Cheerleader
- Organizer of processes, people and paper
- Facilitator
- Determine documentation that is BEST to submit

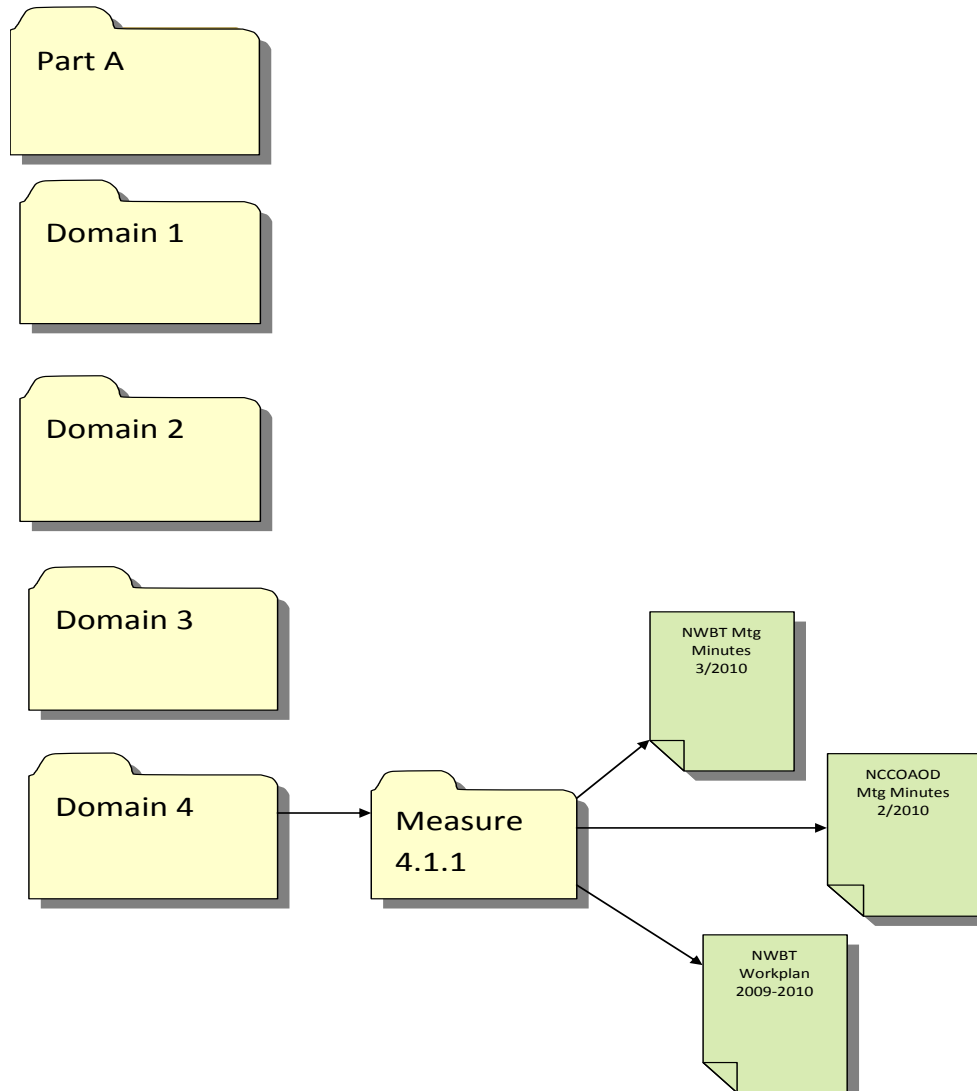
Documentation Decision

- No “right” or “wrong” way (ex. full staff vote, AC makes decision, program directors decision etc....)
- Being small is a bonus – less documents to choose from 😊
- “Live” accreditation will allow more time for group discussion to identify and determine best document submissions
- Ultimately, may need someone to have authority to make final decision in a stalemate
- LESS is MORE!!!

Files and Folders Are Your Friends!

Use what is:

- feasible
- logical
- familiar and
- accessible to all necessary staff.



Key Lessons Learned Completing the Self Assessment

- Date all documents as they are created
- Highlight the specific response to a standard/measure
- Allow uninterrupted time to do the “uploading” process (consider one person do it all)
- Assure the locally saved files/folders mirror exactly what is uploaded to PHAB
- Save your “thoughts” as you upload documents either in writing or electronically (example to follow)

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b) All Hazards Plan/ERP <i>DONE 4-7-2010</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ① Norton EOP website
c) Policies and Procedures ensuring 24/7 coverage <i>DONE 4-1-10</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ① KDHE Disease Surveillance Reporting Guidelines
d) Contracts/MOAs/MOUs/Mutual assistance agreements with other public and private laboratories <i>DONE 4-1-10</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ① KDHE Disease Surveillance Reporting Guidelines
e) Protocols for handling and submitting specimens <i>DONE 4-1-10</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ① KDHE packing & shipping instructions website
Additional Documentation Submitted & Comments (Optional)		

Hardcopy of the Self-Assessment Tool

This is a simple way to keep track of what was used for documentation, why it was selected, who created and/or found it, and when it was uploaded to PHAB.

Organize Domains & Measures for “Live” Accreditation

- Spreadsheet that breaks down each standard as follows (hardcopy example available):
 - Overall summary of accreditation self-assessment
 - Summary by each Domain
 - Opportunities for improvement = remaining gaps
 - Further defines each gap (ex. one gap can sometimes fulfill multiple standards)
 - Time and resources needed
 - Prioritization
 - Project management tool

Key Lessons Learned Completing the Self Assessment

- Backup all corresponding files/folders!!!
- If multiple people are gathering documentation per domain/measure, need some way to manage “who is doing what, by when”
- Find a system that makes sense for you to do the uploading (ex. one domain at a time)
- Don’t overlook the “simple” things such as.....

Key Lessons Continued.....

- Assure scanned submissions are legible and “right-side-up”



SUGGESTIONS FOR SITE VISIT PREP

- RELAX – accreditation of public health is about IMPROVING public health, not defending/proving your innocence😊
- Site visit agenda
- Provide working lunch away from the LHD (if possible)
- Be prepared to allow the site visitors “executive sessions”
- Prep your staff and external partners
- Make the agenda a department-wide document
- Invite community partners, BOH, member(s) from the governing body etc to the working lunches for the site visitors to have face-to-face discussions in a more relaxed atmosphere

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used. Judges will independently score each cow and calf. The total score of both judges will be used to rank pairs in the respective divisions.

The grand champion pair will win \$600, while the reserve grand champion will earn \$400, third place \$250, fourth place \$150 and fifth place \$100.

All cows and calves must be unloaded and processed by 11:00 a.m. September 13. The show begins at 2:00 p.m. All entries must arrive and leave September 13.

The entry fee is \$25 per pair. Entries are due to the Kansas State Fair by August 16. For more information, go to <<http://www.kansasstatefair.com/>>www.kansasstatefair.com or call the Kansas State Fair office at (800) 362-3247.



Mark Paepcke, Public Health Accreditation Board member, Janet Canavese site visitor, Gina Frack, Norton County Health

Department Administrator and Georgeen Polyak, site visitor, discuss public health needs. -Telegram photo by Harriett Gill

Health Department helps with test



TOOT Your Horn - Contact Local Media

Public health all too often fails to take the time to tell our story, so don't miss this HUGE opportunity with your accreditation efforts!!

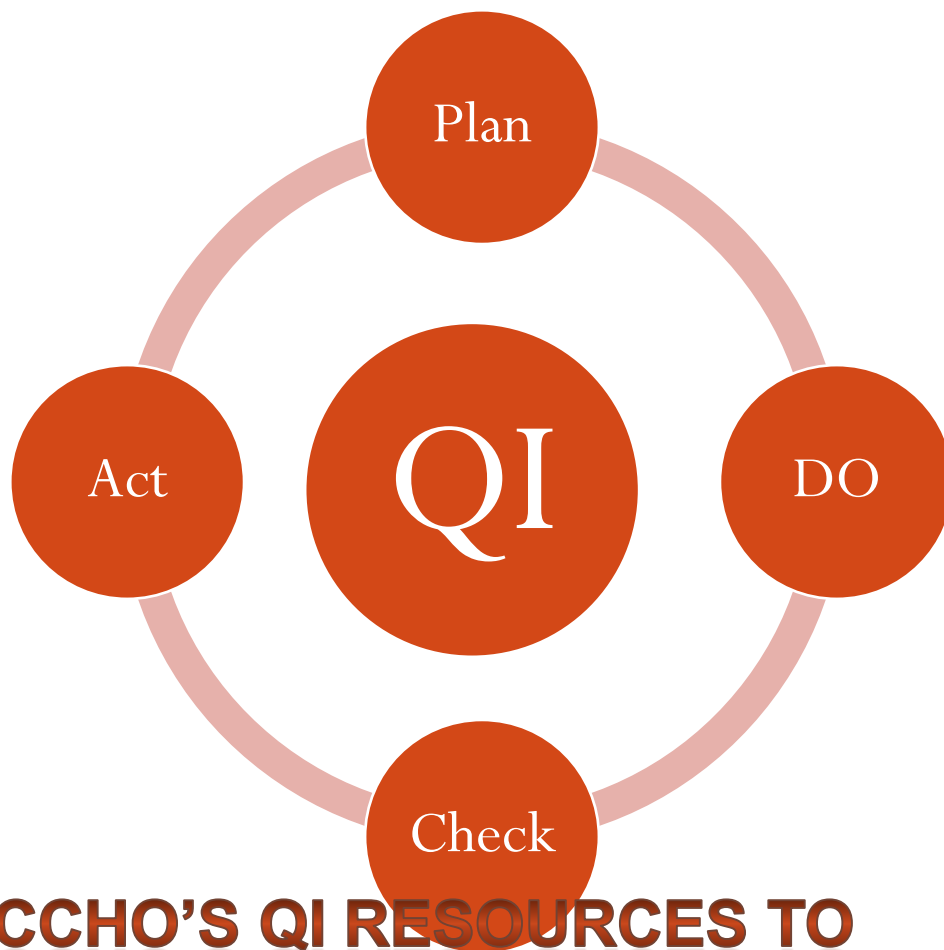
Beta Lessons Learned

- It is doable and reasonable
- It will take our LHD a few years before applying
- Accreditation is an ongoing process to improve public health. It is NOT just attaining a certificate.
- It is time intensive
- Depending on your SHD to LHD relationships, there can be varying gaps that will need to be met before either can achieve accreditation
- Document, document, document!!
- Focus is on what is being done to meet a standard/measure, NOT how or by whom.

Quality Improvement & Accreditation....what's the connection?

QI on it's own is a proven improvement process that is relatively new to small LHDs.

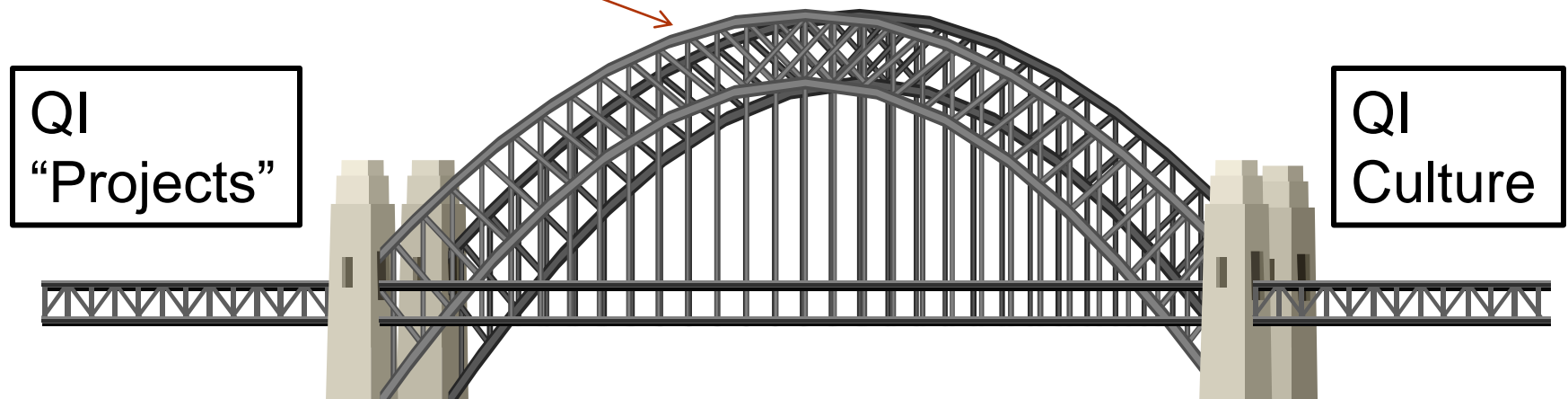
Accreditation is the motivator for public health to begin learning about and applying it.



**CHECK OUT NACCHO'S QI RESOURCES TO
LEARN MORE**

Progression of QI

- First – QI Projects
- Second – Build the Bridge towards a QI Culture



“Bridging” will involve local, state and federal level efforts.

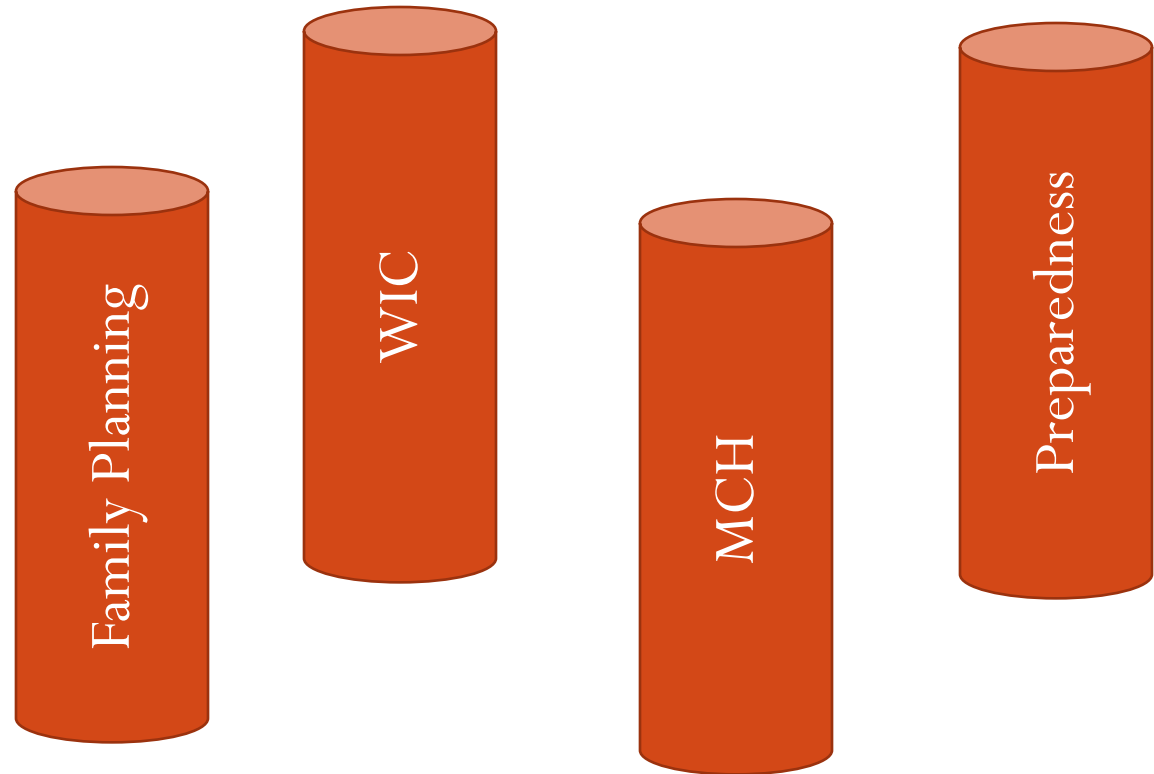
Effects of Accreditation

Due to the continual depopulation of rural America, accreditation may also be the time that the decades old public health infrastructure is recreated.

- Provides potential to improve public health
- May inadvertently create wider gaps between LHDs that can from those that cannot
- Key is to NOT focus on accreditation, but rather on the “baby steps” to get there

Accreditation's Effect on the Perception of Public Health

The “silos” will still exist for funding reasons, but accreditation being based upon the “10 Essential Services” is reshaping how we now think of public health in the U.S.



Our Next Steps:

Accreditation Standards

Concentrating on these biggest “building blocks” to get us closer to the standards. Then will focus on the smaller gaps that remain.

Required to Apply for
National Accreditation

Strategic Plan

Community Health Improvement Plan
(CHIP)

Community Health Assessment

“The distance is nothing; it is only the first step that is difficult.”

Madame Marie du Deffand



Thank You!!

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